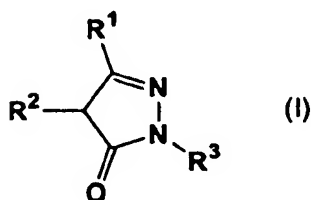


Claims

1. A method for prevention and/or therapy of arterial wall injury which comprises a step of administering the pyrazolone derivative represented by the following formula (I) or the physiologically acceptable salt thereof, or the hydrate or solvate thereof in a preventively or therapeutically effective amount to mammals including humans:



wherein R¹ represents a hydrogen atom, an aryl group, a C₁₋₅ alkyl group, or a C₃₋₆ (total carbon number) alkoxy carbonyl alkyl group; R² represents a hydrogen atom, an aryloxy group, an arylmercapto group, a C₁₋₅ alkyl group or a C₁₋₃ hydroxyalkyl group; or R¹ and R² are combined with each other to represent C₃₋₅ alkylene group; and R³ represents a hydrogen atom, a C₁₋₅ alkyl group, a C₅₋₇ cycloalkyl group, a C₁₋₃ hydroxyalkyl group, a benzyl group, a naphthyl group, a phenyl group, or a phenyl group substituted with the same or different 1 to 3 substituents selected from the group consisting of a C₁₋₅ alkyl group, a C₁₋₅ alkoxy group, a C₁₋₃ hydroxyalkyl group, a C₂₋₅ (total carbon number) alkoxy carbonyl group, a C₁₋₃ alkylmercapto group, a C₁₋₄ alkylamino group, a C₂₋₈ (total carbon number) dialkylamino group, a halogen atom, a trifluoromethyl group, a carboxyl group, a cyano group, a hydroxyl group, a nitro group, an amino group and an acetamide group.

2. The method according to claim 1 wherein the pyrazolone derivative represented by the formula (I) is 3-methyl-1-phenyl-2-pyrazolin-5-one.

3. The method according to claim 1 or 2 wherein the arterial wall injury is percutaneous transluminal coronary angioplasty (PTCA) or coronary-artery bypass graft (CABG).

4. The method according to claim 1 or 2 wherein the arterial wall injury is restenosis or neointimal formation after percutaneous transluminal coronary angioplasty